B1 (Official Form 1) (04/13)

United States Bankruptcy Court Eastern District of California				Voluntary Petition						
Name of Debtor (if individual, enter Last, First, Middle): Name of Joint Debtor (Spouse) (Last, First, Sanchez, Jose David				Middle):						
All Other Names used by the Debtor in the last 8 year (include married, maiden, and trade names): See Schedule Attached	rs		All Other Names used by the Joint Debtor in (include married, maiden, and trade names):							
Last four digits of Soc. Sec. or Individual-Taxpayer I. (if more than one, state all): 3226 / 20-1251		plete EIN	Last four digits of Soc. Sec. or Individual-Taxpay (if more than one, state all):			axpayer I.I	D. (ITIN) /Complete EIN			
Street Address of Debtor (No. & Street, City, State & 20370 Valley Blvd.	z Zip Code):		Street Add	Street Address of Joint Debtor (No. & Street, City, State & Z			te & Zip Code):			
Tehachapi, CA	ZIPCODE 935	561	1					ZIPCODE		
County of Residence or of the Principal Place of Busi	iness:		County of 1	Residence	e or of tl	he Principal Pla	ce of Busin	e of Business:		
Mailing Address of Debtor (if different from street ad	ddress)		Mailing Ac	ldress of	Joint De	ebtor (if differen	t from stre	et address):		
	ZIPCODE		1					ZIPCODE		
Location of Principal Assets of Business Debtor (if d	ifferent from stre	eet address al	bove):							
							:	ZIPCODE		
Type of Debtor (Form of Organization) (Check one box.) Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. Corporation (includes LLC and LLP) Partnership Other (If debtor is not one of the above entities, check this box and state type of entity below.) Chapter 15 Debtor Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending: Filing Fee (Check one box) Filing Fee to be paid in installments (Applicable to only). Must attach signed application for the court' consideration certifying that the debtor is unable to except in installments. Rule 1006(b). See Official in Filing Fee waiver requested (Applicable to chapter only). Must attach signed application for the court' consideration. See Official Form 3B.	U.S.C. § Railroad Stockbrok Commodi Clearing I Other Debtor is Title 26 o Internal R o individuals o pay fee Form 3A.	set Real Esta 101(51B) ter tty Broker Bank Tax-Exemp theck box, if a tax-exempt f the United tevenue Code Check one Debtor i Debtor i Check if: Check if: Check all a	te as defined in the as defined in the as defined in the as defined in the applicable.) It organization is States Code (the as). box: s a small busing s not a small busing s being filed was being filed with the applicable box is being filed with the association of the	under ne ness debte usiness d subject to tes:	Chaper as defebtor as etition	the Petition apper 7 supper 9 supper 11 supper 12 supper 13 supper 13 supper 13 supper 13 supper 13 supper 14 supper 15 supper 16 supper 17 supper 17 supper 17 supper 17 supper 17 supper 18 supper	n is Filed (Chay Recc Main Chay Recc Non Nature of (Check one y consume 1 U.S.C. red by an y for a r house- C. § 101(5) J.S.C. § 10 debts owed to the every three	e box.) r		
Statistical/Administrative Information Debtor estimates that funds will be available for one of the debtor estimates that, after any exempt property in the debtor estimates that, after any exempt property in the debtor estimates that, after any exempt property in the debtor estimates that, after any exempt property in the debtor estimates that the debtor estimates the debtor estimates that the debtor estimates that the debtor estimates the debtor est		secured cred				o funds availabl	le for	THIS SPACE IS FOR COURT USE ONLY		
distribution to unsecured creditors. Estimated Number of Creditors	00- 5,001	- 10		25,001- 50,000		50,001- 100,000	Over 100,000			
		000,001 \$5 0 million \$1	50,000,001 to	\$100,00 to \$500		\$500,000,001 to \$1 billion	More than			
Estimated Liabilities		000,001 \$5 0 million \$1	0,000,001 to	\$100,00 to \$500	,	\$500,000,001 to \$1 billion	More than \$1 billion			

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Voluntary Petition (This page must be completed and filed in every case)	Name of Debtor(s): Sanchez, Jose David	ÿ			
All Prior Bankruptcy Case Filed Within Las	t 8 Years (If more than two, attac	h additional sheet)			
Location Where Filed: None	Case Number:	Date Filed:			
Location Where Filed:	Case Number:	Date Filed:			
Pending Bankruptcy Case Filed by any Spouse, Partner or	Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)				
Name of Debtor: None	Case Number:	Date Filed:			
District:	Relationship:	Judge:			
Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.) Exhibit A is attached and made a part of this petition. Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certificate that I delivered to the debtor the notice required by 11 U.S.C. § 342(b)					
	X /s/ Phillip Gillet Jr. Attor	ney at Law 6/20/13 Date			
Yes, and Exhibit C is attached and made a part of this petition. No Exhi (To be completed by every individual debtor. If a joint petition is filed, eximple the period of the period	ach spouse must complete and atta	ch a separate Exhibit D.)			
If this is a joint petition: Exhibit D also completed and signed by the joint debtor is attached.	ed a made a part of this petition.				
Information Regardin (Check any approached in this petition or for a longer part of such 180 ☐ Debtor has been domiciled or has had a residence, principal place of preceding the date of this petition or for a longer part of such 180 ☐ There is a bankruptcy case concerning debtor's affiliate, general place of business or assets in the United States in this District, or the interests of the parties will be served in reg	oplicable box.) of business, or principal assets in the days than in any other District. partner, or partnership pending in tace of business or principal assets but is a defendant in an action or pro-	this District. in the United States in this District, occeding [in a federal or state court]			
Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes.) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)					
(Name of landlord that obtained judgment)					
(Address o	of landlord)				
Debtor claims that under applicable nonbankruptcy law, there are the entire monetary default that gave rise to the judgment for post	session, after the judgment for pos	session was entered, and			
Debtor has included in this petition the deposit with the court of filing of the petition.	any rent that would become due du	aring the 30-day period after the			
☐ Debtor certifies that he/she has served the Landlord with this cert	Africation. (11 U.S.C. § 362(1)).				

Voluntary Petition	Name of Debtor(s): Sanchez, Jose David
(This page must be completed and filed in every case)	
	ntures
Signature(s) of Debtor(s) (Individual/Joint) I declare under penalty of perjury that the information provided in this	Signature of a Foreign Representative I declare under penalty of perjury that the information provided in this
petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.	petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only one box.) I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached. Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.
X /s/ Jose David Sanchez	Signature of Foreign Representative
Signature of Debtor Jose David Sanchez	
X	Printed Name of Foreign Representative
Signature of Joint Debtor	
Telephone Number (If not represented by attorney)	Date
June 20, 2013	
Date	
Signature of Attorney*	Signature of Non-Attorney Petition Preparer
V (/ D) '''' O'' A A A A A A A A A	I declare under penalty of perjury that: 1) I am a bankruptcy petition
X /s/ Phillip Gillet Jr. Attorney at Law Signature of Attorney for Debtor(s)	preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document
Phillip Gillet Jr. Attorney at Law 214914 Phillip Gillet, Jr. Attorney at Law 1705 27th Street Bakersfield, CA 93301	and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that
lawyer@bak.rr.com	section. Official Form 19 is attached.
	Printed Name and title, if any, of Bankruptcy Petition Preparer
June 20, 2013	Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)
Date *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.	Address
Signature of Debtor (Corporation/Partnership)	
I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.	Signature
The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.	Date Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.
X	Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is
Signature of Authorized Individual	not an individual:
Printed Name of Authorized Individual	If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.
Title of Authorized Individual	A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.
Date	

Case No. _____

${f IN} \; {f RE} \; {\sf Sanchez}$, Jose D	David	Jose	Sanchez.	\mathbf{RE}	IN
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Debtor(s)

VOLUNTARY PETITION Continuation Sheet - Page 1 of 1

All Other Names used by the Debtor in the last 8 years:

Jose David Sanchez D.D.S Inc. J D Sanchez Jose Sanchez Joe David Sanchez David Sanchez

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United States Bankruptcy Court Eastern District of California

IN RE:		Case No
Sanchez, Jose David		Chapter 13
·	Debtor(s)	•

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 169,722.00		
B - Personal Property	Yes	3	\$ 108,109.95		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$ 265,372.54	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	7		\$ 288,644.70	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			\$ 6,251.92
J - Current Expenditures of Individual Debtor(s)	Yes	1			\$ 5,074.13
	TOTAL	18	\$ 277,831.95	\$ 554,017.24	

United States Bankruptcy Court Eastern District of California

IN RE:	Case No
Sanchez, Jose David	Chapter 13
Debtor(s)	
STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND REI	LATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 0.00

State the following:

Average Income (from Schedule I, Line 16)	\$ 6,251.92
Average Expenses (from Schedule J, Line 18)	\$ 5,074.13
Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C	
Line 20)	\$ 7,400.00

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 67,570.54
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 288,644.70
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 356,215.24

Debtor(s)

o.

(If known)

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

R S SECURED CLAIM OR EXEMPTION					•
Primary residence @ 23321 Willow Canyon Rd, Tehachapi, CA Fee Simple H 169,722.00 234,890	DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY	AMOUNT OF SECURED CLAIM
	Primary residence @ 23321 Willow Canyon Rd, Tehachapi, CA	Fee Simple	Н	169,722.00	234,890.54
TOTAL 400 700 00					

TOTAL

169,722.00

Case 13-14296	Filed 06/20/13	Doc 1
Case 13-14630	1 1160 00120113	

B6B (Official Form 6B) (12/07)

IN RE Sanchez, Jose David

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Debtor(s)		(If known)

Case No

Debioi(s)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
Cash on hand.		Cash on hand		1,000.00
Checking, savings or other financial accounts, certificates of deposit or		Bank of The West - checking account ending in 2796 (balance as of 5/4/2013)	Н	29.95
shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Bank of the West Business acct. xxx-9342 (balance as of 5/7/13)	Н	0.00
Security deposits with public utilities, telephone companies, landlords, and others.	X			
Household goods and furnishings, include audio, video, and computer equipment.		Household goods and furnishings		3,000.00
 Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. 	X			
6. Wearing apparel.		Clothing		3,000.00
7. Furs and jewelry.		Jewelry		500.00
Firearms and sports, photographic, and other hobby equipment.	X			
Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
Annuities. Itemize and name each issue.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
Stock and interests in incorporated and unincorporated businesses. Itemize.		Stock business entity (owns 100% of shares) business market value \$200,000.00 / liabilities of corporation \$239,000.00		0.00
14. Interests in partnerships or joint ventures. Itemize.	X			
		8		

Case No

Debtor(s)

(If known)

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

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	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
15.	Government and corporate bonds and other negotiable and non-negotiable instruments.	Х			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.		Case filed for personal injury 11/01/2012 case no. 30-2012- 00609541-CU-PL-CJC .	Н	unknown
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and		1963 Ford Galaxie approx. 23,043 miles. (needs motor)	Н	7,500.00
	other vehicles and accessories.		1970 Ford Mustang - approx. 63,415 miles.	Н	35,000.00
			1990 Ford Mustang - approx. 13,752 miles.	Н	15,000.00
			1998 Cadillac Deville 4D approx. 200,000 miles. (Assistant drives vehicle for errands and wife's doctor visits)	С	1,500.00
			2003 Ford Taurus 4D SE approx. 180,000 miles. (Title only, mother in laws car)		1,000.00
			2005 Ford Mustang - approx. 111,456 miles	Н	12,500.00
			2010 Ford Mustang GT500 approx. 15,000 miles	Н	28,080.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
			9		

C	TAT -
Case	NO

Debtor(s)

(If known)

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
 Machinery, fixtures, equipment, and supplies used in business. Inventory. Animals. Crops - growing or harvested. Give particulars. Farming equipment and implements. Farm supplies, chemicals, and feed. Other personal property of any kind not already listed. Itemize. 	x			
		TO	ΓAL	108,109.95

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B6C (Official	Form	6C)	(04/13)	۱

IN	\mathbf{RE}	Sanchez,	Jose	Dav	id
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Case No.

Debtor(s

	(If known)
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SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under: (Check one box)

Check if debtor claims a homestead exemption that exceeds \$155,675. *

11 U.S.C. § 522(b)(2) 11 U.S.C. § 522(b)(3)

SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
CCCP § 703.140(b)(5)	1,000.00	1,000.00
CCCP § 703.140(b)(5)	29.95	29.95
CCCP § 703.140(b)(3)	3,000.00	3,000.00
CCCP § 703.140(b)(3)	3,000.00	3,000.00
CCCP § 703.140(b)(4)	500.00	500.00
CCCP § 703.140(b)(5)	10,595.05	15,000.00
CCCP § 703.140(b)(5)	1,500.00	1,500.00
CCCP § 703.140(b)(5)	1,000.00	1,000.00
CCCP § 703.140(b)(2) CCCP § 703.140(b)(5)	4,800.00 7,700.00	12,500.00
	CCCP § 703.140(b)(5) CCCP § 703.140(b)(5) CCCP § 703.140(b)(3) CCCP § 703.140(b)(3) CCCP § 703.140(b)(4) CCCP § 703.140(b)(5) CCCP § 703.140(b)(5) CCCP § 703.140(b)(5)	CCCP § 703.140(b)(5) CCCP § 703.140(b)(5) CCCP § 703.140(b)(3) CCCP § 703.140(b)(3) CCCP § 703.140(b)(3) CCCP § 703.140(b)(4) CCCP § 703.140(b)(5) 4,800.00

^{*} Amount subject to adjustment on 4/1/16 and every three years thereafte 1 with respect to cases commenced on or after the date of adjustment.

security interests.

Case No	
	(If known)

Debtor(s)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 45216434		Н	Installment account opened 2009-11-24 -				30,482.00	2,402.00
Ford Cred Po Box Box 542000 Omaha, NE 68154			2010 Ford Mustang					
			VALUE \$ 28,080.00					
ACCOUNT NO. 7092926448		Н	Mortgage account opened 2006-06-20 -				234,890.54	65,168.54
Ocwen Loan Servicing L 12650 Ingenuity Dr Orlando, FL 32826			Primary residence at: 23321 Willow Canyon Rd, Tehachapi, CA					
			VALUE \$ 169,722.00	L				
ACCOUNT NO.								
			VALUE \$					
ACCOUNT NO.			VALUE \$					
0 continuation sheets attached	-		(Total of th		otot		\$ 265,372.54	\$ 67,570.54
			(Use only on la		Tot pag		\$ 265,372.54	\$ 67,570.54

(Report also on Summary of Schedules.)

(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

0 continuation sheets attached

Case No. (If known)

Debtor(s)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

liste	deport the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority and on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on Statistical Summary of Certain Liabilities and Related Data.
\checkmark	Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TY	PES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
	Domestic Support Obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
	Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
	Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
	Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
	Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
	Deposits by individuals Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
	Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
	Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
	Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).
	* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

IN RE Sanchez, Jose David

Debtor(s)

Case No.

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 3226		w	Unknown - Medical			寸	
Apria Healthcare P.O. Box 31001-1157 Pasadena, CA 91110							15.09
ACCOUNT NO. 1039995553		Н	Account opened 2012-08-07 - Mobile			寸	
AT&T P.O. Box 60017 Los Angeles, CA 90060							166.00
ACCOUNT NO.			Assignee or other notification for:			十	
Afni, Inc. Po Box 3097 Bloomington, IL 61702			AT&Ť				
ACCOUNT NO. 10305-3-0280-2		Н	1/2013 - Construction repair			T	
Belfor USA Bakersfield 3553 Landco Drive Ste A Bakersfield, CA 93308							25,769.03
6 continuation sheets attached			(Total of th	Subt			\$ 25,950.12
			(Use only on last page of the completed Schedule F. Report the Summary of Schedules and, if applicable, on the St Summary of Certain Liabilities and Relate	T also atist	ota o or tica	ıl n ıl	

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Debtor(s)

_ Case No. _____

(If known)

		(Continuation Sneet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 612379		Н	Unknown - Collection account	T		П	
Bingo Publishers 24881 Alicia Pkwy Ste # E-300 Laguna Hills, CA 92653							520.00
ACCOUNT NO. 8470		w	Unknown - Medical			Н	
Buena Vista Emergency Medical Dept LA 32386 Pasadena, CA 91185							
10000175140 4000 2000757 4		w	Unknown - Medical		Н	Н	36.00
ACCOUNT NO. 1366-3902757.1 Cedars Sinai Imaging Med P.O. Box 4313 Woodland Hills, CA 91365-4313		VV	Official and a second a second and a second				12.51
ACCOUNT NO.			Assignee or other notification for:		Н	Н	12.31
Medicredit, Inc. P.O. Box 410917 St. Louis, MO 63141	Ce		Cedars Sinai Imaging Med				
ACCOUNT NO. 3994290			Unknown - Medical		Н	Н	
Cedars Sinai Medical Center 1801 West Olympic Pasadena, CA 91199							4 250 00
ACCOUNT NO.			Assignee or other notification for:		Н	Н	1,258.60
Medicredit, Inc. P.O. Box 410917 St. Louis, MO 63141			Cedars Sinai Medical Center				
ACCOUNT NO. M1100146/3		W	Unknown - Medical		Н		
Cedars Sinai Medical Center P.O. Box 54679 Los Angeles, CA 90054							
					Ш	Ц	44.08
Sheet no. <u>1</u> of <u>6</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of the Completed Schedule F. Report the Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Relate	T als tatis	age Fota so or stica	e) al n al	\$ 1,871.19

Debtor(s)

_ Case No. _____

(If known)

		(1	Continuation Sneet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.			Assignee or other notification for:	+			
Medicredit, Inc. P.O. Box 410917 St. Louis, MO 63141			Cedars Sinai Medical Center				
ACCOUNT NO. 1366/39364681		W	Unknown - Medical	+			
Cedars Sinai Medical Center P.O. Box 4313 Woodland Hills, CA 91365							272.00
ACCOUNT NO.	<u> </u>		Assignee or other notification for:				273.00
Medicredit, Inc. P.O. Box 410917 St. Louis, MO 63141			Cedars Sinai Medical Center				
ACCOUNT NO. 2502986		w	Unknown - Medical				
Cedars Sinai Medical Center P.O. Box 48954 Los Angeles, CA 90048							677.00
ACCOUNT NO. Medicredit, Inc. P.O. Box 410917 St. Louis, MO 63141			Assignee or other notification for: Cedars Sinai Medical Center				677.68
ACCOUNT NO. 1366-3899214.1		w	Unknown - Medical	+		-	
Cedars Sinai Medical Center P.O. Box 4313 Woodland Hills, CA 91365							6.17
ACCOUNT NO.			Assignee or other notification for:		\vdash	F	0.17
Medicredit, Inc. P.O. Box 410917 St. Louis, MO 63141			Cedars Sinai Medical Center				
Sheet no. 2 of 6 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	-	ag	e)	\$ 956.85
			(Use only on last page of the completed Schedule F. Reporthe Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Rela	rt als Statis	stic	on al	\$

_____ Case No. _____

Debtor(s)

(If known)

		(Continuation Sheet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 3994290	H	w	Unknown - Medical	H		H	
Cedars Sinai Medical Center File 1108 1801 West Olympic Pasadena, CA							135.86
ACCOUNT NO.			Assignee or other notification for:				
Medicredit, Inc. P.O. Box 410917 St. Louis, MO 63141			Cedars Sinai Medical Center				
ACCOUNT NO. 00450924306800		Н	Unknown - Revolving business account	H			
Chase Bank Usa N.A. P.O. Box 659732 San Antonio, TX 78265			· ·				54,651.59
ACCOUNT NO. 3261012100812-0103892		Н	Unknown - Collection account				04,001.00
Debt Recovery Solutions, Llc P.O. Box 9001 Westbury, NY 11590							
ACCOUNT NO. 543759		Н	Account opened 2010-12-06 - Medical	\vdash			66.32
Delmer W. Henninger Md 39755 Date St . Murrieta, CA 92563							
ACCOUNT NO.			Assignee or other notification for:	┢			69.00
Capital Accounts 1642 Westgate Cir Ste 20 Brentwood, TN 37027			Delmer W. Henninger Md				
ACCOUNT NO.	\vdash	Н	Unknown	\vdash			
DIO USA 3540 Wilshire Blvd. Ste 1104 Los Angeles, CA 90010							20.000.00
Sheet no. 3 of 6 continuation sheets attached to	_			L Sub	tota	L al	22,000.00
Schedule of Creditors Holding Unsecured Nonpriority Claims			(Use only on last page of the completed Schedule F. Reporthe Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Relate	is p T t als tatis	age Fota o o stica	e) al n al	\$ 76,922.77 \$

Case No. _

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		(1	Continuation Sneet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.		Н	Unknown- Hair Treatment	T			
Dr. Jon Gaffney Hair Club For Men 9201 West Sunset Blvd. Ste 510 West Hollywood, CA 90069							8,000.00
ACCOUNT NO.		Н	Unknown				
Dr. Michael Shalhoub C.E.V.L.L.C. 2433 Spectrum Irvine, CA 92618							35,000.00
ACCOUNT NO. Case no. 30-00609541		Н	Default judgment	T			
Gregory W. Moreno & Associates The Brewer Company 3500 W. Beverly Blvd. Montebello, CA 90640							unknown
ACCOUNT NO. 3226		Н	Unknown - Medical	T			
Halls Ambulance 1001 21st Street Bakersfield, CA 93301							
ACCOUNT NO. Case no. S-1500-CV-273284		Н	Default Judgment - S-1500-CV-273284	<u> </u>			101.43
Hemar, Rousso, & Heald, LLP 15910 Ventura Blvd, 12th Floor Encino, CA 91436							444.040.45
ACCOUNT NO			Assignee or other notification for:	╁			111,648.45
ACCOUNT NO. De Lage Landen Financial Services 1111 Old Eagle School Road Wayne, PA 19087			Hemar, Rousso, & Heald, LLP				
ACCOLINE NO			Assignee or other notification for:	╁			
ACCOUNT NO. Kern County Sheriff's Office - Civil Sec Levy No.2013022680 P.O. Box 70127 Bakersfield, CA 93387			Hemar, Rousso, & Heald, LLP				
Sheet no. 4 of 6 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		<u> </u>	(Total of t	•	age	e)	\$ 154,749.88
			(Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Related	t als	tic	n al	\$

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Debtor(s)

Case No. ____

(If known)

		- (•	Continuation Sheet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 0001678730		Н	Unknown - Collection account			П	
Hp Sears 2000 18th St Bakersfield, CA 93301							1,275.00
ACCOUNT NO. 1100146-7		Н	Unknown - Medical			Н	.,
Medicredit P.O. Box 410917 St Louis, MO 63141							3,036.75
ACCOUNT NO. 3226		Н	Unknown - Medical	\vdash		H	3,000.70
Pain Institute Of California 9802 Stockdale Hwy 105 Bakersfield, CA 93311							30.00
ACCOUNT NO. Dr.DavidSanchez		Н	Unknown	H			
Riemser P.O. Box 12339 RTP, NC 27709	_						000.00
ACCOUNT NO. 158902-0410-001		w	Unknown - Medical	\vdash		\vdash	880.00
Tehachapi Valley Healthcare 115 West E Street Tehachapi, CA 93561							044.50
ACCOUNT NO. 158902-0412-001		w	Unknown - Medical	\vdash		Н	214.56
Tehachapi Valley Healthcare 115 West E Street Tehachapi, CA 93561		•••	officiown - Medical				
ACCOUNT NO. 450000 0442 004		w	Unknown - Medical	H		H	312.00
ACCOUNT NO. 158902-0413-001 Tehachapi Valley Healthcare 115 West E Street Tehachapi, CA 93561		VV	OTIVITOMIT - MIGUICAL				89.58
Sheet no 5 of 6 continuation sheets attached to				Sub			
Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of the (Use only on last page of the completed Schedule F. Reporthe Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Related	T t als tatis	Fota o o stica	al n	\$ 5,837.89

____ Case No. ____

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		(1	Continuation Sheet)					
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMO O CLA	F
ACCOUNT NO.		Н	Unknown - Revolving charge account (S-1500-	\top				
Viking Funding Group 110 Jericho Turnpike Floral Park, NY 11001			CV-278698)				22	356.00
AGGOVINENO	-		Assignee or other notification for:	+	-		22,	330.00
ACCOUNT NO. Thomas R. Mulally, Esq. Spencer & Mulally 14156 Magnolia Blvd., Ste. 200 Sherman Oaks, CA 91423			Viking Funding Group					
ACCOUNT NO.								
ACCOUNT NO.								
ACCOUNT NO.								
ACCOUNT NO.								
ACCOUNT NO.								
Sheet no.			(Total of	Sul this p			\$ 22,	356.00
			(Use only on last page of the completed Schedule F. Reporthe Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Rela	ort als Stati	Tot so c	al on al	\$ 288,	644.70

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R6G (Official Form 6G) (12/07)	Case 13-14296	Filed 06/20/13	Doc

IN RE Sanchez, Jose David

Debtor(s)

Case No. _______

(If known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

1

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

✓ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

B6H (Official Form 6H) (12/07)	Case 13-14296	Filed 06/20/13	Doc
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IN RE Sanchez, Jose David Case No. ___

Debtor(s)

SCHEDULE H - CODEBTORS

a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or

(If known)

name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Sanchez, Marianne Emory 23321 Willow Canyon Rd. Fehachapi, CA 93561	(nondebtor spouse)

22

IN RE Sanchez, Jose David

_____ Case No. _

Debtor(s)

(If known)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on From 22A, 22B, or 22C.

Debtor's Marital Status DEPENDENTS O			OF DEBTOR ANI	SPOU	SE		
Separated		RELATIONSHIP(S):				AGE(S):	
EMPLOYMENT:		DEBTOR			SPOUSE		
Occupation Name of Employer		anchez DDS Inc.	isabled				
How long employed Address of Employer	4 years 20370 W. Val Tehachapi, C	=					
INCOME: (Estima	ate of average o	r projected monthly income at time case filed	()		DEBTOR		SPOUSE
	_	lary, and commissions (prorate if not paid me		\$	7,400.00		DI OCOL
2. Estimated month		,, ,		\$.,,,,,,,,,,	\$	
3. SUBTOTAL				\$	7,400.00	\$	0.00
4. LESS PAYROL	L DEDUCTION	NS		<u> </u>	·		
a. Payroll taxes a				\$	1,074.08	\$	
b. Insurance		•		\$		\$	
c. Union dues				\$			
d. Other (specify)) <mark>Sdi</mark>			\$	74.00	\$	
				<u>\$</u>		\$	
5. SUBTOTAL O				\$	1,148.08		0.00
6. TOTAL NET M	IONTHLY TA	KE HOME PAY		\$	6,251.92	\$	0.00
7. Regular income	from operation	of business or profession or farm (attach deta	iled statement)	\$		\$	
8. Income from rea		1	,	\$		\$	
9. Interest and divid				\$		\$	
		ort payments payable to the debtor for the del	btor's use or				
that of dependents 11. Social Security		iment assistance		\$		\$	
		anon ussistance		\$		\$	
(4)				\$		\$	
12. Pension or retir				\$		\$	
13. Other monthly				¢		¢	
(Specify)				ф —		Φ	
				\$		\$	
14. SUBTOTAL C	OF LINES 7 TH	HROUGH 13		\$		\$	
15. AVERAGE M	ONTHLY INC	COME (Add amounts shown on lines 6 and 1	4)	\$	6,251.92	\$	0.00
		ONTHLY INCOME: (Combine column total reported on line 15)	ls from line 15;		\$	6,251.92	2
					also on Summary of Sch al Summary of Certain I		

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document: **None**

IN RE Sanchez, Jose David

	TA T
Case	NO.

(If known)

5,074.13

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Debtor(s)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made biweekly,
quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed
on Form22A or 22C.

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$	1,637.62
a. Are real estate taxes included? Yes ✓ No		
b. Is property insurance included? Yes ✓ No		
2. Utilities:		
a. Electricity and heating fuel	\$	280.00
b. Water and sewer	\$	110.00
c. Telephone	\$	
d. Other AT&T	\$	300.00
	\$	
3. Home maintenance (repairs and upkeep)	\$	150.00
4. Food	\$	400.00
5. Clothing	\$	100.00
6. Laundry and dry cleaning	\$	75.00
7. Medical and dental expenses	\$	
8. Transportation (not including car payments)	\$	150.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	30.00
10. Charitable contributions	\$	
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	
b. Life	\$ —	
c. Health	\$	
d. Auto	\$	341.51
e. Other	\$	0
c. Other	— ¢ —	
12. Taxes (not deducted from wages or included in home mortgage payments)	Ψ	
	\$	
(Specify)	— ¢ —	
13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)	Ψ	
a. Auto	•	
	φ	
b. Other	•	
14. Alimony, maintanance, and sympost maid to others	•	1 500 00
14. Alimony, maintenance, and support paid to others15. Payments for support of additional dependents not living at your home	» —	1,500.00
	ф —	
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	
17. Other	\$	
	\$	
	\$	

19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of this document: None

20. STATEMENT OF MONTHLY NET INCOME

applicable, on the Statistical Summary of Certain Liabilities and Related Data.

a. Average monthly income from Line 15 of Schedule I	\$ 6,251.92
b. Average monthly expenses from Line 18 above	\$ 5,074.13
c. Monthly net income (a. minus b.)	\$ 1,177.79

Signature:

Signature:

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Case	No.

Debtor(s)

(If known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social Security No. (Required by 11 U.S.C. § 110.)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document.

Address

Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the _______ (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the _____ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ sheets (*total shown on summary page plus I*), and that they are true and correct to the best of my knowledge, information, and belief.

(Print or type name of individual signing on behalf of debtor)

(Joint Debtor, if any)

[If joint case, both spouses must sign.]

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

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United States Bankruptcy Court Eastern District of California

IN RE:		Case No
Sanchez, Jose David		Chapter 13
Ι	Debtor(s)	1

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101(2),(31).

1. Income from employment or operation of business

None	State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business
	including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this
_	case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that
	maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the
	beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing
	under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a
	joint petition is not filed.)

AMOUNT SOURCE

33,300.00 2013 Year-to-date gross wages

72,197.57 2012 - Wages

36,205.00 2011 - Wages

2. Income other than from employment or operation of business

None State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

3. Payments to creditors

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Complete a. or b., as appropriate, and c.

One	a. Individual or joint debtor(s) with primarity consumer debts: List all payments on loans, installment purchases of goods or services, and other
	debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that
	constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of
	a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit
	counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint
	petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF PAYMENTS

AMOUNT PAID AMOUNT STILL OWING

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Ford Credit P.O. Box	Regular monthly car payments	4,116.00 33,000.00
Pasadena, CA 91109-7172 Ocwen Loan Servicing 12650 Ingenuity Dr Orlando, FL 32826	Regular monthly mortgage payments	4,911.00 240,287.00
preceding the commencement of the ca \$6,255.* If the debtor is an individual, obligation or as part of an alternative representation debtors filing under chapter 12 or chaps is filed, unless the spouses are separate * Amount subject to adjustment on 4/01. None c. All debtors: List all payments made who are or were insiders. (Married debt	by consumer debts: List each payment or other transfer to use unless the aggregate value of all property that constitution indicate with an asterisk (*) any payments that were mad payment schedule under a plan by an approved nonprofit beter 13 must include payments and other transfers by either d and a joint petition is not filed.) 1/16, and every three years thereafter with respect to case within one year immediately preceding the commencements filing under chapter 12 or chapter 13 must include passes are separated and a joint petition is not filed.)	tutes or is affected by such transfer is less that e to a creditor on account of a domestic support udgeting and credit counseling agency. (Married or or both spouses whether or not a joint petition as commenced on or after the date of adjustment tent of this case to or for the benefit of creditor.
4. Suits and administrative proceedings, exc	ecutions, garnishments and attachments	
bankruptcy case. (Married debtors filin	reedings to which the debtor is or was a party within on g under chapter 12 or chapter 13 must include information pouses are separated and a joint petition is not filed.)	
	COURT OR AGENCY URE OF PROCEEDING AND LOCATION JUDGMENT SUPERIOR COUNTY 1415 TRU BAKERSFIELD, CA	DISPOSITION FOR KERN DEFAULT JUDGMENT JXTUN AVE,
THE BREWER COMPANY vs CIVII DAVID SANCHEZ, DDS - CASE NO 30-00609541-CU-PL-CJC	JUDGMENT SUPERIOR COURT ORANGE COUNTY CENTER DRIVE W ANA. CA 92702	700 CIVIC

vs. JOSE DAVID SANCHEZ DDS

JOSE DAVID SANCHEZ, DDS vs. CIVIL

CIVIL

VIKING FUNDING GROUP, INC.

THE BREWER COMPANY,

CASE NO. 30-2012-00609541-

HENRY SCHEIN DENTAL

BAKERSFIELD, CA 93301 SUPERIOR COURT OF CALIFORNIA

CALIFORNIA
COUNTY OF ORGANGE

700 CIVIC CENTER DRIVE WEST

SUPERIOR COURT OF KERN

COUNTY 1415 TRUXTUN AVE,

SANTA ANA, CA 92702

CU-PL-CJC

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None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

De Lage Landen Finacial Services

111 Old Eagle School Road Wayne, PA 19087

DATE OF SEIZURE **4/3/2013**

DESCRIPTION AND VALUE

OF PROPERTY

Business bank account / \$26,000.00

PENDING

PENDING

5. Repossessions, foreclosures and returns

None List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

6. Assignments and receiverships

None a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)



None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

7. Gifts

None List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

8. Losses

None List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement

DESCRIPTION AND VALUE OF PROPERTY **Business location \$175,000** DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS Water damage/flood

DATE OF LOSS 1/13/2013

9. Payments related to debt counseling or bankruptcy

of this case. NAME AND ADDRESS OF PAYEE

Phillip Gillet, Jr. 1705 27th St. Bakersfield, CA 93311

DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR 11/28/2012 - 5/14/2013 (Applied to balance as of 5/15/13)

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

AMOUNT AND DATE OF SALE

OR CLOSING

10. Other transfers



a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

11. Closed financial accounts

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

Bank Of The West P.O. Box 2830 Omaha, NE 68103

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

Checking and Savings account ending in 8463

12/1/12 \$1,589.24

12. Safe deposit boxes

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

13. Setoffs



None List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None	List all property owned by another person that the debtor holds or controls.
15. P	rior address of debtor
None	If debtor has moved within three years immediately preceding the commence that period and vacated prior to the commencement of this case. If a joint p
16. S _]	pouses and Former Spouses

thin three years immediately preceding the commencement of this case, list all premises which the debtor occupied during d prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

14. Property held for another person

None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

Marianne Emory Sanchez

17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

18. Nature, location and name of business

a. If the debtor is an individual, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/COMPLETE EIN

20-1251002

NAME David Sanchez Dds Inc. **ADDRESS** 20370 Valley Blvd Tehachapi, CA 93561 NATURE OF BUSINESS **Dentist**

BEGINNING AND ENDING DATES 2009 - Present

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

 \checkmark

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The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within the six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

signo	ture page.)
19. E	Books, records and financial statements
None	a. List all bookkeepers and accountants who within the two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.
Con 2211	DATES SERVICES RENDERED present 18 Old Town Road achapi, CA 93561
None	b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.
None	c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.
None	d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within the two years immediately preceding the commencement of this case.
20. I	nventories
None	a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.
None	b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.
21. (Current Partners, Officers, Directors and Shareholders
None	a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.
None	b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.
	NATURE AND DEDCENTAGE

22. Former partners, officers, directors and shareholders

None a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

OF STOCK OWNERSHIP

Shareholder 100% of stocks

TITLE

CEO

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

23. Withdrawals from a partnership or distributions by a corporation

None If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

24. Tax Consolidation Group

NAME AND ADDRESS

Jose David Sanchez

None If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

~=	Doncion	T 1

None If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Signature /s/ Jose David Sanchez	
of Debtor	Jose David Sanchez
Signature	
of Joint Debtor	
(if any)	
0 continuation pages attached	
	of Debtor Signature of Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

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B1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Eastern District of California

IN RE:	Case No.
Sanchez, Jose David	Chapter 13
Debtor(s)	•
EXHIBIT D - INDIVIDUAL DEBTOR'S STATEME	

CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you canno do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.
Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.
1. Within the 180 days before the filing of my bankruptcy case , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
2. Within the 180 days before the filing of my bankruptcy case , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
□ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the sever days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]
If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.
4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]
Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
Active military duty in a military combat zone.
5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Jose David Sanchez	
Date: June 20. 2013	

Certificate Number: 00555-CAE-CC-021232623



CERTIFICATE OF COUNSELING

I CERTIFY that on June 19, 2013, at 5:47 o'clock PM EDT, Jose D Sanchez received from Advisory Credit Management, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Eastern District of California, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: June 19, 2013 By: /s/Rose Vazquez

Name: Rose Vazquez

Title: Credit Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

UNITED STATES BANKRUPTCY COURT

NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a joint case (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$46 administrative fee, \$15 trustee surcharge: Total fee \$306)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your

Page 2

discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$46 administrative fee: Total fee \$281)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1167 filing fee, \$46 administrative fee: Total fee \$1213)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$46 administrative fee: Total fee \$246)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Case 13-14296 Filed 06/20/13 Doc 1

United States Bankruptcy Court Eastern District of California

IN RE:	Case No
Sanchez, Jose David	Chapter 13
Debtor(s)	• •

CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE Certificate of [Non-Attorney] Bankruptcy Petition Preparer		
Printed Name and title, if any, of Bankruptcy Petition Preparer Address:		ocial Security number (If the bankruptcy etition preparer is not an individual, state e Social Security number of the officer, rincipal, responsible person, or partner of e bankruptcy petition preparer.)
x	(F	Required by 11 U.S.C. § 110.)
Signature of Bankruptcy Petition Preparer of off partner whose Social Security number is provide		
	Certificate of the Debtor	
I (We), the debtor(s), affirm that I (we) have reco	eived and read the attached notice, as required	d by § 342(b) of the Bankruptcy Code.
Sanchez, Jose David	X /s/ Jose David Sanci	hez 6/20/2013
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	X	

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Signature of Joint Debtor (if any)

Date

Case 13-14296 Filed 06/20/13 Doc 1

B22C (Official Form 22C) (Chapter 13) (04/13)	According to the calculations required by this statement:
	☐ The applicable commitment period is 3 years.
In re: Sanchez, Jose David	☐ The applicable commitment period is 5 years.
Debtor(s)	☑ Disposable income is determined under § 1325(b)(3).
Case Number:	☐ Disposable income is not determined under § 1325(b)(3).
	(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual Chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

			Part I. REP	ORT OF INCOME				
		a. [ital/filing status. Check the box that applies and of Unmarried. Complete only Column A ("Debtar Married. Complete both Column A ("Debtar Married.")	tor's Income") for Lines 2-10.				
	1	the si	igures must reflect average monthly income receivix calendar months prior to filing the bankruptcy of the before the filing. If the amount of monthly incomoving the divide the six-month total by six, and enter the re	case, ending on the last day of the me varied during the six months, you		Column A Debtor's Income	;	Column B Spouse's Income
	2	Gros	ss wages, salary, tips, bonuses, overtime, comm	issions.	\$	7,400.00	\$	0.00
	3	Income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 3. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part IV.						
		a.	Gross receipts	\$				
Ì		b.	Ordinary and necessary operating expenses	\$				Ī
		c.	Business income	Subtract Line b from Line a	\$	0.00	\$	0.00
	4	diffe	t and other real property income. Subtract Line rence in the appropriate column(s) of Line 4. Do notlude any part of the operating expenses ente IV. Gross receipts Ordinary and necessary operating expenses					
		c.	Rent and other real property income	\$ Subtract Line b from Line a				
ļ			2 2 7	Subtract Line o from Line a	\$	0.00	Ė	0.00
_	5					0.00	_	0.00
	6		ion and retirement income.		\$	0.00	\$	0.00
	7	expe that by th	amounts paid by another person or entity, on a nses of the debtor or the debtor's dependents, purpose. Do not include alimony or separate mai the debtor's spouse. Each regular payment should be nent is listed in Column A, do not report that payment should be necessarily as a second	including child support paid for ntenance payments or amounts paid be reported in only one column; if a	\$	0.00	\$	0.00

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8	Unemployment compensation. Enter the amount in the appropriate column However, if you contend that unemployment compensation received by you was a benefit under the Social Security Act, do not list the amount of such a Column A or B, but instead state the amount in the space below:	ı or your spou	se					
	Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$ Spouse	\$0.0	00	\$	0.0	0 \$	0.00	
9	Income from all other sources. Specify source and amount. If necessary, sources on a separate page. Total and enter on Line 9. Do not include alim maintenance payments paid by your spouse, but include all other paym or separate maintenance. Do not include any benefits received under the Act or payments received as a victim of a war crime, crime against humanit of international or domestic terrorism. a. b.	nony or separ nents of alimo Social Securit	ony y	\$	0.0	0 4	0.00	
10	Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed through 9 in Column B. Enter the total(s).	, add Lines 2		\$ \$	7,400.00			
11	Total. If Column B has been completed, add Line 10, Column A to Line 10 and enter the total. If Column B has not been completed, enter the amount Column A.			\$		<u> </u>	7,400.00	
	Part II. CALCULATION OF § 1325(b)(4) COM	MITMENT	PER	IOI)			
12	Enter the amount from Line 11.					\$	7,400.00	
13	Marital Adjustment. If you are married, but are not filing jointly with you that calculation of the commitment period under § 1325(b)(4) does not requive your spouse, enter on Line 13 the amount of the income listed in Line 10, Ca regular basis for the household expenses of you or your dependents and s basis for excluding this income (such as payment of the spouse's tax liability persons other than the debtor or the debtor's dependents) and the amount of purpose. If necessary, list additional adjustments on a separate page. If the adjustment do not apply, enter zero. a. b. c. Total and enter on Line 13.	uire inclusion Column B that pecify, in the ty or the spous f income devo	of the was l lines se's s oted to	e inco NOT below uppo o eac	ome of paid on w, the ort of	\$	0.00	
14	Subtract Line 13 from Line 12 and enter the result.					\$	7,400.00	
15	Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the number 12 and enter the result.					\$	88,800.00	
16	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of							
		er debtor's ho	useho	old si	ze: _2	\$	63,030.00	
17	 Application of § 1325(b)(4). Check the applicable box and proceed as directed. ☐ The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commitment period is 3 years" at the top of page 1 of this statement and continue with this statement. ✓ The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable commitment period is 5 years" at the top of page 1 of this statement and continue with this statement. 							
	Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSABLE INCOME							

18	Enter the amount from Line 11.					\$	7,400.00
19	Marital adjustment. If you are maritotal of any income listed in Line 10, expenses of the debtor or the debtor' Column B income (such as payment than the debtor or the debtor's dependencessary, list additional adjustments not apply, enter zero. a. b. c.	s dependents. Spe of the spouse's tandents) and the an	was NO ecify in ax liabi nount o	T paid on a regular basis for the lines below the basis for lity or the spouse's support of income devoted to each p	r the household r excluding the of persons other urpose. If		
20	Total and enter on Line 19. Current monthly income for § 132	5(b)(2) Subtract	Lina 1	O from Line 19 and enter th	a regult	\$	7,400.00
21	Annualized current monthly incon 12 and enter the result.					\$	88,800.00
22	Applicable median family income.	Enter the amoun	t from l	Line 16.		\$	63,030.00
The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable incounder § 1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement on Line 21 is not more than the amount on Line 22. Check the box for "Disposable determined under § 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement and complete Parts IV, V, or VI.							
23	determined under § 1325(b)(3)" complete Parts IV, V, or VI.	at the top of page	e 1 of th	his statement and complete	Part VII of this state		
	determined under § 1325(b)(3)" complete Parts IV, V, or VI. Part IV. CALCULAT	at the top of page	OUCTI		Part VII of this state ER § 707(b)(2)		
23 24A	determined under § 1325(b)(3)" complete Parts IV, V, or VI. Part IV. CALCULAT	TION OF DED tions under Stan and services, ho e "Total" amount of persons. (This rt.) The applicabl	DUCTI dards Dusekee t from I inform le numble	CONS ALLOWED UND of the Internal Revenue Seping supplies, personal category (RS National Standards for Lation is available at www.upper of persons is the number	ER § 707(b)(2) Ervice (IRS) re, and Allowable Living doj.gov/ust/ or that would		Do not
	determined under § 1325(b)(3)" complete Parts IV, V, or VI. Part IV. CALCULAT Subpart A: Deduct National Standards: food, apparel miscellaneous. Enter in Line 24A th Expenses for the applicable number from the clerk of the bankruptcy cou currently be allowed as exemptions of	TION OF DED tions under Stan and services, ho e "Total" amount of persons. (This rt.) The applicabl on your federal in Enter in Line a1 b ns under 65 years ns 65 years of age k of the bankrupto ge, and enter in L e number of perso you support.) Mu lt in Line c1. Mul esult in Line c2.	DUCTI Duction Ductio	cons allowed under the internal Revenue Seping supplies, personal cater and in Early and in Line allowed in Early and in Line allowed in Early and in Line allowed in Early and in Line bloom is available number of the applicable number of the applicable number of an early and in Line bloom is available number of persons is the number of the applicable number of persons in Early and in Line bloom in Early Line bloom in Earl	Part VII of this state ER § 707(b)(2) Prvice (IRS) re, and Allowable Living doj.gov/ust/ or that would f any additional I Standards for tional Standards for ticable number of rsons who are 65 ber in that n, plus the number a total amount for total amount for	\$	Do not
224A	National Standards: food, apparel miscellaneous. Enter in Line 24A th Expenses for the applicable number from the clerk of the bankruptcy cou currently be allowed as exemptions of dependents whom you support. National Standards: health care. E Out-of-Pocket Health Care for perso Out-of-Pocket Health Care for perso www.usdoj.gov/ust/ or from the clerh persons who are under 65 years of ag years of age or older. (The applicable category that would currently be allowed and additional dependents whom y persons under 65, and enter the resul persons 65 and older, and enter the r	TION OF DED tions under Stan and services, ho e "Total" amount of persons. (This rt.) The applicabl on your federal in Enter in Line a1 b ns under 65 years ns 65 years of age k of the bankrupto ge, and enter in L e number of perso you support.) Mu lt in Line c1. Mul esult in Line c2.	DUCTI dards Dusekee t from I inform le numb acome t elow the s of age e or old cy cour ine b2 ons in e ns on y altiply Li Add Li	cons allowed under the internal Revenue Seping supplies, personal cater and in Early and in Line allowed in Early and in Line allowed in Early and in Line allowed in Early and in Line bloom is available number of the applicable number of the applicable number of an early and in Line bloom is available number of persons is the number of the applicable number of persons in Early and in Line bloom in Early Line bloom in Earl	Part VII of this state ER § 707(b)(2) Prvice (IRS) re, and Allowable Living doj.gov/ust/ or that would f any additional I Standards for tional Standards for ticable number of rsons who are 65 ber in that n, plus the number a total amount for at health care	\$	Do not
24A	Subpart A: Deduct Subpart A: Deduct National Standards: food, apparel miscellaneous. Enter in Line 24A th Expenses for the applicable number from the clerk of the bankruptcy cou currently be allowed as exemptions of dependents whom you support. National Standards: health care. E Out-of-Pocket Health Care for perso Out-of-Pocket Health Care for perso www.usdoj.gov/ust/ or from the clerl persons who are under 65 years of ag years of age or older. (The applicable category that would currently be allowed of any additional dependents whom y persons under 65, and enter the result persons 65 and older, and enter the ramount, and enter the result in Line 2	TION OF DED tions under Stan and services, ho e "Total" amount of persons. (This rt.) The applicabl on your federal in Enter in Line a1 b ns under 65 years ns 65 years of age k of the bankrupto ge, and enter in L e number of perso you support.) Mu lt in Line c1. Mul esult in Line c2.	DUCTI dards Dusekee t from I inform le numb acome t elow the s of age e or old cy cour ine b2 ons in e ns on y altiply Li Add Li	cons allowed under the initial statement and complete in the initial statement and complete in the initial statement are the initial statement and initial statement in the	Part VII of this state ER § 707(b)(2) Prvice (IRS) re, and Allowable Living doj.gov/ust/ or that would f any additional I Standards for tional Standards for ticable number of rsons who are 65 ber in that n, plus the number a total amount for at health care	\$	
24A	National Standards: food, apparel miscellaneous. Enter in Line 24A th Expenses for the applicable number from the clerk of the bankruptcy cou currently be allowed as exemptions of dependents whom you support. National Standards: health care. E Out-of-Pocket Health Care for perso Out-of-Pocket Health Care for perso Out-of-Pocket Health Care for perso www.usdoj.gov/ust/ or from the clerk persons who are under 65 years of ag years of age or older. (The applicable category that would currently be allowed and additional dependents whom ypersons under 65, and enter the result persons 65 and older, and enter the ramount, and enter the result in Line 2	at the top of page FION OF DED tions under Stan and services, ho e "Total" amount of persons. (This rt.) The applicabl on your federal in Enter in Line a1 be ns under 65 years ns 65 years of age k of the bankrupte ge, and enter in Le e number of perso you support.) Mu let in Line c1. Mul esult in Line c2. A 24B.	DUCTI	cons ALLOWED UND of the Internal Revenue Sering supplies, personal car RS National Standards for action is available at www.us oer of persons is the number of the amount from IRS National act, and in Line a2 the IRS National can din Line a1 the IRS National can din Line b1 the applicable number of persons is the number of persons in the applicable number of persons in the applicable number of persons are category is the number of persons and income tax returns and by Line b1 to obtain the a2 by Line b2 to obtain a total cons 65 years of age or older	Part VII of this state ER § 707(b)(2) Prvice (IRS) re, and Allowable Living doj.gov/ust/ or that would f any additional I Standards for tional Standards for tional Standards for tioable at icable number of rsons who are 65 ber in that n, plus the number a total amount for total amount for al health care	\$	Do not

DZZC (Omc	al Form 22C) (Chapter 13) (04/13)					
25A	and U infor famil	the amount of the IRS Housing and family size. (This kruptcy court). The applicable aptions on your federal income tt.	\$	487.00			
25B	the II infor- famil tax re the A	RS Housing and Utilities Standards; mortgage/rent expense for your communition is available at www.usdoj.gov/ust/ or from the clerk of the bandy size consists of the number that would currently be allowed as exempturn, plus the number of any additional dependents whom you support werage Monthly Payments for any debts secured by your home, as standards;	the number of any additional dependents whom you support. ds: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of ag and Utilities Standards; mortgage/rent expense for your county and family size (this available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (The applicable sists of the number that would currently be allowed as exemptions on your federal income the number of any additional dependents whom you support.); enter on Line b the total of onthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b denter the result in Line 25B. Do not enter an amount less than zero.				
	a.	IRS Housing and Utilities Standards; mortgage/rental expense	\$ 1,322.00				
	b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47	\$ 1,703.56				
	c.	Net mortgage/rental expense	Subtract Line b from Line a	\$	0.00		
26	Utilit	25B does not accurately compute the allowance to which you are entities Standards, enter any additional amount to which you contend you our contention in the space below:		\$	0.00		
	an ex	al Standards: transportation; vehicle operation/public transportation; vehicle operation/public transportation in this category regardless of whether you pay the exegardless of whether you use public transportation.					
27.4	expe	k the number of vehicles for which you pay the operating expenses or nses are included as a contribution to your household expenses in Line					
27A		$\boxed{1}$ 2 or more.					
	Trans Loca Statis	u checked 0, enter on Line 27A the "Public Transportation" amount fresportation. If you checked 1 or 2 or more, enter on Line 27A the "Ope 1 Standards: Transportation for the applicable number of vehicles in the stical Area or Census Region. (These amounts are available at www.use-bankruptcy.court.)	erating Costs" amount from IRS ne applicable Metropolitan	\$	236.00		
			ense. If you pay the operating				
Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 27B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at					0.00		
	www	www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)					

$\underline{B22C\ (Official\ Form\ 22C)\ (Chapter\ 13)\ (04/13)}$

Dage (OHIC	al Form 22C) (Chapter 13) (04/13)					
	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)						
	v 1	\square 2 or more.					
	_	r, in Line a below, the "Ownership Costs" for "One Car" from the IRS	Local Standards:				
		sportation (available at www.usdoj.gov/ust/ or from the clerk of the ba					
28	the to	otal of the Average Monthly Payments for any debts secured by Vehic	le 1, as stated in Line 47;				
	subtr	ract Line b from Line a and enter the result in Line 28. Do not enter a	n amount less than zero.	_			
	a.	IRS Transportation Standards, Ownership Costs	\$ 517.00				
	b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47	\$ 503.33				
	c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a		13.67		
29	Enter Tran the to	Al Standards: transportation ownership/lease expense; Vehicle 2. Oked the "2 or more" Box in Line 28. Tr, in Line a below, the "Ownership Costs" for "One Car" from the IRS sportation (available at www.usdoj.gov/ust/ or from the clerk of the bastal of the Average Monthly Payments for any debts secured by Vehicle act Line b from Line a and enter the result in Line 29. Do not enter a	Local Standards: ankruptcy court); enter in Line b le 2, as stated in Line 47;				
2>	a.	IRS Transportation Standards, Ownership Costs	\$]			
	-	Average Monthly Payment for any debts secured by Vehicle 2, as	Ψ				
	b.	stated in Line 47	\$				
	c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a	\$	0.00		
30	feder	er Necessary Expenses: taxes. Enter the total average monthly expensed, state, and local taxes, other than real estate and sales taxes, such as s, social-security taxes, and Medicare taxes. Do not include real estate	s income taxes, self-employment	\$	1,456.67		
31	dedu	er Necessary Expenses: involuntary deductions for employment. Excions that are required for your employment, such as mandatory retiruniform costs. Do not include discretionary amounts, such as voluntary amounts.	ement contributions, union dues,	\$	0.00		
	Othe	er Necessary Expenses: life insurance. Enter total average monthly	premiums that you actually pay				
32		erm life insurance for yourself. Do not include premiums for insura					
	whol	le life or for any other form of insurance.		\$	0.00		
33	requi	er Necessary Expenses: court-ordered payments. Enter the total modered to pay pursuant to the order of a court or administrative agency, senents. Do not include payments on past due obligations included in	uch as spousal or child support	\$	0.00		
34	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.						
			nount that you actually avoand	\$	0.00		
35		er Necessary Expenses: childcare. Enter the total average monthly and hildcare—such as baby-sitting, day care, nursery and preschool. Do not not be a superior of the contract					
	payments.						
36	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39.						
		er Necessary Expenses: telecommunication services. Enter the total		\$			
		actually pay for telecommunication services other than your basic hom					
37	servi	ce-such as pagers, call waiting, caller id, special long distance, or in	ternet service—to the extent				
		ssary for your health and welfare or that of your dependents. Do not in	nclude any amount previously	¢.	0.00		
	aedu	icted. 41		\$	0.00		

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38	Total l	Expenses Allowed under IRS Standar	ds. Enter the total of Lines 24 through 37.	\$	3,366.34
			ional Expense Deductions under § 707(b) any expenses that you have listed in Lines 24-37		
	expens		Health Savings Account Expenses. List the monthly below that are reasonably necessary for yourself, your		
	a. l	Health Insurance	\$		
	b. l	Disability Insurance	\$		
39	c. l	Health Savings Account	\$		
	Total a	and enter on Line 39	<u> </u>	\$	0.00
	the spa	do not actually expend this total amorace below:	unt, state your actual total average monthly expenditures in		
40	monthl elderly	ly expenses that you will continue to pay	ehold or family members. Enter the total average actual y for the reasonable and necessary care and support of an your household or member of your immediate family who is de payments listed in Line 34.	\$	1,500.00
41	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.				0.00
42	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.				0.00
43	Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$156.25 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.				0.00
44	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.				0.00
45	Charit charita	table contributions. Enter the amount reble contributions in the form of cash or	easonably necessary for you to expend each month on financial instruments to a charitable organization as defined any amount in excess of 15% of your gross monthly		
	income	e.		\$	0.00

			Subpart C	: Deductions for De	ebt Pay	ment			
	you Payr the t	own, list the name of the creditornent, and check whether the payotal of all amounts scheduled as twing the filing of the bankruptor. Enter the total of the Average	or, identify to ment includes contractually cy case, divi	he property securing les taxes or insurance lly due to each Secur ded by 60. If necessa	the del e. The red Cred	ot, state the A Average Mor ditor in the 60	Average of the state of the sta	Monthly yment is s	
47		Name of Creditor	Property	Securing the Debt		Average Monthly Payment	includ	s payment e taxes or nsurance?	
	a.	Ford Cred	Automo	bile (1)	\$	503.33	☐ ye	s 🗹 no	
	b.	Ocwen Loan Servicing L	Residen	ice	\$	1,703.56	▼ ye	s 🗌 no	
	c.				\$		☐ ye	s no	
				Total: Ad	ld lines	a, b and c.			\$ 2,206.89
	you cred cure fore	residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.							
48		Name of Creditor		Property Securing t	the Deb	t		Oth of the e Amount	
	a.						\$		
	b.						\$		
	c.						\$		
						Total: Ad	ld lines a	a, b and c.	\$ 0.00
49	such	ments on prepetition priority of as priority tax, child support are cruptcy filing. Do not include c	nd alimony o	claims, for which you	ı were l	iable at the t	ime of y		\$ 0.00
				<u> </u>	sc sci (
		pter 13 administrative expense resulting administrative expense		· · ·			Line b, a	nd enter	
				the amount in Line		e amount in I	Line b, a	nd enter	
50	the r	esulting administrative expense	hapter 13 pl strict as det utive Office s available a	an payment. ermined under for United States t	a by th	e amount in I		nd enter	
50	the n	Projected average monthly Cl Current multiplier for your di schedules issued by the Exect Trustees. (This information is www.usdoj.gov/ust/ or from t	hapter 13 pl strict as det utive Office available a he clerk of	an payment. ermined under for United States t the bankruptcy	s by the	e amount in I	326.77 4.2%	nd enter	
50	the i	Projected average monthly Cl Current multiplier for your di schedules issued by the Exect Trustees. (This information is www.usdoj.gov/ust/ or from t court.)	hapter 13 pl strict as det utive Office available a he clerk of	an payment. ermined under for United States t the bankruptcy	s by the	e amount in I	326.77 4.2%	nd enter	\$ 13.72
50	the rate a. b.	Projected average monthly Cl Current multiplier for your di schedules issued by the Exect Trustees. (This information is www.usdoj.gov/ust/ or from t court.) Average monthly administration	hapter 13 pl strict as detative Office available a he clerk of	an payment. ermined under for United States t the bankruptcy of Chapter 13	x X Total: and b	e amount in I	326.77 4.2%	nd enter	\$ 13.72
	the rate a. b.	Projected average monthly Cl Current multiplier for your di schedules issued by the Exect Trustees. (This information is www.usdoj.gov/ust/ or from t court.) Average monthly administratic case I Deductions for Debt Payment. F	hapter 13 pl strict as detentive Office available a he clerk of the cl	an payment. ermined under for United States t the bankruptcy of Chapter 13	X Total: and b	e amount in I	326.77 4.2%	nd enter	

		Part V. DETERMINATION OF DISPOSABLE INCOME UNDER	2 § 1325(b)(2)			
53	Tota	l current monthly income. Enter the amount from Line 20.		\$	7,400.00	
54	disab	port income. Enter the monthly average of any child support payments, foster care partity payments for a dependent child, reported in Part I, that you received in accordant cable nonbankruptcy law, to the extent reasonably necessary to be expended for such	ce with	\$	0.00	
55	Qualified retirement deductions. Enter the monthly total of (a) all amounts withheld by your employer from wages as contributions for qualified retirement plans, as specified in § 541(b)(7) and (b) all required repayments of loans from retirement plans, as specified in § 362(b)(19).					
56	Total of all deductions allowed under § 707(b)(2). Enter the amount from Line 52.					
	for win lir total prov	chich there is no reasonable alternative, describe the special circumstances and the results action as a separate page. Total the expension Line 57. You must provide your case trustee with documentation of these expenses and expension described explanation of the special circumstances that make such expenses nable.	ulting expenses es and enter the s and you must			
57		Nature of special circumstances	Amount of expense			
	a.		\$			
	b.		\$			
	c.		\$			
		Total: Add I	Lines a, b, and c	\$	0.00	
58		l adjustments to determine disposable income. Add the amounts on Lines 54, 55, 5 the result.	6, and 57 and	\$	7,086.95	
59	Mon	thly Disposable Income Under § 1325(b)(2). Subtract Line 58 from Line 53 and en	ter the result.	\$	313.05	
		Part VI. ADDITIONAL EXPENSE CLAIMS				
	and wincon	r Expenses. List and describe any monthly expenses, not otherwise stated in this form relfare of you and your family and that you contend should be an additional deduction the under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page monthly expense for each item. Total the expenses.	from your curren	t montl	nly	
		Expense Description	Monthly A	mount]	
60	a.		\$			
	b.		\$			
	c.		\$			
		Total: Add Lines a, b and	c \$		J	
		Part VII. VERIFICATION				
		are under penalty of perjury that the information provided in this statement is true and debtors must sign.)	l correct. (If this a	joint c	ase,	
61	Data	June 20, 2013 Signature: /s/ Jose David Sanchez				
0.1	Date.					
	Date.	Signature. /S/ Jose David Sanchez (Debtor)				

United States Bankruptcy Court Eastern District of California

IN	RE:		Case No.
Sa	nchez, Jose David		Chapter 13
	Debtor(s	(8)	•
	DISCLOSURE OF	COMPENSATION OF ATTORNEY	FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 20 one year before the filing of the petition in bankruptcy, of or in connection with the bankruptcy case is as follows:	or agreed to be paid to me, for services rendered or to b	ned debtor(s) and that compensation paid to me within the rendered on behalf of the debtor(s) in contemplation
	For legal services, I have agreed to accept		\$\$
	Prior to the filing of this statement I have received		\$\$
	Balance Due		\$
2.	The source of the compensation paid to me was:	bebtor Other (specify):	
3.	The source of compensation to be paid to me is:	bebtor Other (specify):	
4.	I have not agreed to share the above-disclosed comp	pensation with any other person unless they are membe	rs and associates of my law firm.
	I have agreed to share the above-disclosed compentogether with a list of the names of the people shari	sation with a person or persons who are not members or ing in the compensation, is attached.	or associates of my law firm. A copy of the agreement,
5.	In return for the above-disclosed fee, I have agreed to re-	nder legal service for all aspects of the bankruptcy case,	, including:
	b. Preparation and filing of any petition, schedules, sta	itors and confirmation hearing, and any adjourned hearings and other contested bankruptey matters;	ings thereof;
б.	By agreement with the debtor(s), the above disclosed fee	e does not include the following services:	
	certify that the foregoing is a complete statement of any a proceeding.	CERTIFICATION greement or arrangement for payment to me for represe	entation of the debtor(s) in this bankruptcy
	June 20, 2013	/s/ Phillip Gillet Jr. Attorney at Law	
-	Date	Phillip Gillet Jr. Attorney at Law 214914 Phillip Gillet, Jr. Attorney at Law 1705 27th Street Bakersfield, CA 93301	
		lawyer@bak.rr.com	